# Appendix D: Policy and Procedures Review Checklist

REVIEWED ORGANIZATION

PERIOD REVIEWED

POLICIES AND PROCEDURES

REVIEWED

NAME OF REVIEWER(S)

DATE COMPLETED

### A. Policies and Procedures Review Checklist Purpose and Instructions

##### General

Peer reviewers should use this checklist as a guide to determine whether (1) the Reviewed Organization’s policies and procedures are consistent with or address each of the seven covered Blue Book standards, and whether (2) the policies and procedures, if properly adopted and performed, would implement each of the seven covered standards. This appendix should be used in conducting both an External Peer Review and a Modified Peer Review. Generally, a separate checklist should be completed for each set of internal policies and procedures that is reviewed. Peer reviewers may streamline this checklist to conduct reviews for smaller I&E units, as appropriate. All changes should be discussed with the Reviewed Organization before conducting the review. Peer reviewers should keep in mind the flexibility offered by the Blue Book, and that overall conclusions should be based on the totality of the information about the Reviewed Organization, when completing the checklists.

##### Use of This Checklist

* 1. Each section in this checklist corresponds to one of the seven covered Blue Book standards. The checklist may be amended to include any additional Blue Book standard(s) covered in the peer review. To facilitate the review, references to the pertinent Blue Book standards are provided; for additional information, the reviewer should refer to the Blue Book.
	2. The Reviewing OIG should provide a **“Yes,” “No,” or “N/A [Not Applicable],”** answer to each question, reflecting its assessment of the Reviewed Organization’s policies and procedures. However, interpretation as to whether the Reviewed Organization’s policies and procedures are consistent with or adequately address specific Blue Book requirement should rely on the Blue Book itself, not the checklist question. The Reviewing OIG also should provide a narrative explanation or comment supporting each determination. If the Reviewing OIG found that the Reviewed Organization’s policies and procedures did not adequately address a standard or part of a standard, the Reviewing OIG should ask the Reviewed Organization’s Point of Contact (POC) how the Reviewed Organization’s internal guidance addresses the standard in order to determine whether the guidance is consistent with or adequately addressed the Blue Book. The completed checklist should be included in the peer review project file.

##### Modified Peer Review

* 1. For a Modified Peer Review, the Reviewing OIG should answer each question by considering whether the Reviewed Organization’s policies and procedures: (1) are current and (2) if adopted and properly performed, address each of the seven covered Blue Book standards. If the Reviewed Organization does not have written policies and procedures, the Reviewing OIG considers the adopted practices used by the Reviewed Organization and how the Reviewed Organization ensures that the I&E staff is aware of the practices.
	2. When conducting a modified peer review of an OIG’s I&E organization that during the 3-year period did not perform and report on I&E projects in compliance with Blue Book standards and did not have internal policies and procedures for performing such work, the Reviewing OIG should modify the checklist as appropriate.

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| **QUALITY CONTROL*****Each OIG organization that conducts inspections should have appropriate internal quality controls for that work.****The nature and the extent of these internal controls and their associated documentation will be dependent on a number of factors, such as the size and structure of the organization and cost-benefit considerations.* |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| -- internal quality controls appropriate for the organization’s work; |  |  |  |  |  |
| -- quality control mechanisms that provide an independent assessment of inspection processes and work as appropriate; |  |  |  |  |  |
| -- documentation of the execution of the quality control mechanisms; and |  |  |  |  |  |
| -- retention of the documentation for the quality control mechanisms? |  |  |  |  |  |
| **Does the organization have policies and procedures for supervisory reviews to help ensure:** |  |
| --the inspection is adequately planned; |  |  |  |  |  |
| --the inspection work plan is followed, and any deviations are authorized; |  |  |  |  |  |
| --the inspection objectives are met; and |  |  |  |  |  |
| --findings, conclusions, and recommendations are adequately supported by evidence? |  |  |  |  |  |

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| **PLANNING****Inspections are to be adequately planned.***Research, work planning, and coordination should be thorough enough, within the time constraints of the inspection, to ensure that the inspection objectives are met.* |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| -- coordination of its work with other inspection, audit, and investigative entities or other organizations that could be affected; |  |  |  |  |  |
| --a process for researching and selecting inspection topics; |  |  |  |  |  |
| -- consideration of the relevance of the topic, impact of potential outcomes, and customer needs; |  |  |  |  |  |
| --reviews of existing data, literature, and discussions with program officials and other key personnel to facilitate understanding of the program/activity to be inspected; |  |  |  |  |  |
| --attempts to identify results of previous relevant reviews; |  |  |  |  |  |
| --followup on known significant findings and recommendations directly related to the current inspection; |  |  |  |  |  |
| --identification of applicable criteria; |  |  |  |  |  |

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| **PLANNING****Inspections are to be adequately planned.***Research, work planning, and coordination should be thorough enough, within the time constraints of the inspection, to ensure that the inspection objectives are met.* |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| --development of project designs/work plans; |  |  |  |  |  |
| --having work plans that include a clearly defined inspection objective(s), scope, and methodology; and |  |  |  |  |  |
| --identification of classified or sensitive information to ensure its protection? |  |  |  |  |  |

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| **DATA COLLECTION AND ANALYSIS*****The collection of information and data will be focused on the organization, program, activity, or function being inspected, consistent with the inspection objectives, and will be sufficient to provide a reasonable basis for reaching conclusions.*** |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| --information sources in supporting documentation are described in sufficient detail to assess the adequacy of the information; |  |  |  |  |  |
| -- reviews to determine whether data obtained is sufficiently accurate and reliable; |  |  |  |  |  |

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| **DATA COLLECTION AND ANALYSIS*****The collection of information and data will be focused on the organization, program, activity, or function being inspected, consistent with the inspection objectives, and will be sufficient to provide a reasonable basis for reaching conclusions.*** |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| -- collection of sufficiently reliable and valid data to address the objectives of the inspection; |  |  |  |  |  |
| -- confidentiality of individuals who provide information, as appropriate; |  |  |  |  |  |
| --adequate safeguarding of sensitive, personal, proprietary, or classified information; |  |  |  |  |  |
| -- information is presented appropriately and logically, with documentation to support the interpretation of the data; |  |  |  |  |  |
| -- supervisory reviews and other safeguards to protect inspection findings from distortions due to biases; and/or personalfeelings; |  |  |  |  |  |
| -- identification of the elements of the finding(s) (criteria, condition, cause, and effect), as appropriate; and |  |  |  |  |  |
| -- elements of the finding(s) that address inspection objectives? |  |  |  |  |  |

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| **EVIDENCE*****Evidence supporting inspection findings, conclusions, and recommendationsshould be sufficient, competent, and relevant and should lead a reasonable person to sustain the findings, conclusions, and recommendations.*** |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| -- sufficient evidence exists to persuade a knowledgeable person that the findings are valid; |  |  |  |  |  |
| --competent evidence was collected and evaluated using reasonable methods given the source (independent, from system with internal controls, etc.) and type (documentary, testimonial, etc.) ofevidence; and |  |  |  |  |  |
| -- the relevance of evidence gathered to its use, (i.e., it has a logical relationship and importance to the issue is it being used to prove or disprove)? |  |  |  |  |  |

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| **RECORDS MAINTENANCE*****All relevant documentation generated, obtained, and used in supporting inspection findings, conclusions, and recommendations should be retained for an appropriate period of time.*** |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| -- supporting information generated and collected as part of an inspection is effectively organized to allow efficient data analysis and provide a sound basis for findings, conclusions, and recommendations; |  |  |  |  |  |
| --supporting documentation that documents the nature and scope of inspection work performed; |  |  |  |  |  |
| --supervisory and team leader reviews are evidenced in the inspection documentation; |  |  |  |  |  |
| -- safe custody and retention of inspection documentation, to include compliance with any records disposal schedule approvedby the National Archives and Records Administration &/ the agency; and |  |  |  |  |  |
| -- documents used to support inspection findings, but maintained by the agency, are not lost, destroyed, or altered? |  |  |  |  |  |

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| **REPORTING*****Inspection reporting shall present factual data accurately, fairly, and objectively and present findings, conclusions, and recommendations in a persuasive manner.****Various means may be used to report on the results of inspection work, e.g., written reports, oral presentations, videos, or slide presentations. The content of the reporting will be affected by the specific means used and the purpose it is serving. Regardless of the means used, there should be retrievable documentation of the reporting.* |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| -- reports describe the objective(s), scope, and methodology of the inspection, and state that they were conducted inaccordance with the CIGIE Quality Standards for Inspection and Evaluation; |  |  |  |  |  |
| -- reports provide readers with the context needed to understand the subject matter being inspected and the impact of any report recommendations; |  |  |  |  |  |
| -- report language is clear and concise, and written in terms intelligible to theintended recipients and informed professionals; |  |  |  |  |  |
| --findings are supported by sufficient, competent, and relevant evidence; |  |  |  |  |  |
| --conclusions are logical inferences about the inspected program or activity based on the inspection findings; |  |  |  |  |  |

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| **REPORTING*****Inspection reporting shall present factual data accurately, fairly, and objectively and present findings, conclusions, and recommendations in a persuasive manner.****Various means may be used to report on the results of inspection work, e.g., written reports, oral presentations, videos, or slide presentations. The content of the reporting will be affected by the specific means used and the purpose it is serving. Regardless of the means used, there should be retrievable documentation of the reporting.* |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| --recommendations are addressed to management officials who can act on them; are not prescriptive: and are presented so as to clearly convey what needs to be corrected or achieved; |  |  |  |  |  |
| -- advance reviews and comments from responsible officials regarding the content of reports are requested , and included or summarized in the report, if appropriate;and |  |  |  |  |  |
| -- reports are distributed to the officials responsible for acting on the findings and recommendations and in accordance with agency-specific policies and applicable laws? |  |  |  |  |  |

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| **FOLLOWUP*****Appropriate followup will be performed to ensure that any inspection recommendations made to Department/Agency officials are adequately considered and appropriatelyaddressed.*** |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent****Policies and Procedures)** |
| **Overall, are the I&E organization’s policies and procedures generally consistent with this standard?** |  |  |  |  |  |

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| **FOLLOWUP*****Appropriate followup will be performed to ensure that any inspection recommendations made to Department/Agency officials are adequately considered and appropriatelyaddressed.*** |
|  | **Yes** | **No** | **N/A** | **Reviewing OIG Explanation and Comments** | **Reference (Identify the Pertinent Policies and Procedures)** |
| **Does the I&E organization have policies and procedures consistent with the standard on:** |  |
| -- assessing whether agency officials have taken timely, complete, and reasonable actions, agreed to by agency management, to correct problemsidentified in inspection reports; |  |  |  |  |  |
| --taking specific followup actions guided by the followup and resolution policies of each OIG, in accordance with Office of Management and Budget Circular No. A-50, as amended; and |  |  |  |  |  |
| --performing followup work to verify whether agreed-on corrective actions were fully and properly implemented? |  |  |  |  |  |